UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

	Case No.	
Elijah Thompson Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) -V-		(to be filled in by the Clerk's Office)
Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)))))	

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

The Clerk will not file a civil complaint unless the person seeking relief pays the entire filing fee (currently \$350) and an administrative fee (currently \$50) in advance, or the person applies for and is granted in forma pauperis status pursuant to 28 U.S.C. § 1915. A prisoner who seeks to proceed in forma pauperis must submit to the Clerk (1) a completed affidavit of poverty and (2) a copy of the trust fund account statement for the prisoner for the six month period immediately preceding the filing of the complaint, obtained from and certified as correct by the appropriate official of each prison at which the prisoner is or was confined for the preceding six months. See 28 U.S.C. § 1915(a)(2).

If the Judge enters an order granting a prisoner's application to proceed in forma pauperis, then the order will assess the filing fee (currently \$350) against the prisoner and collect the fee by directing the agency having custody of the prisoner to deduct an initial partial filing fee equal to 20% of the greater of the average monthly deposits to the prison account or the average monthly balance in the prison account for the six-month period immediately preceding the filing of the complaint, as well as monthly installment payments equal to 20% of the preceding month's income credited to the account for each month that the balance of the account exceeds \$10.00, until the entire filing fee has been paid. See 28 U.S.C. § 1915(b). A prisoner who is granted leave to proceed in forma pauperis is obligated to pay the entire filing fee regardless of the outcome of the proceeding, and is not entitled to the return of any payments made toward the fee.

List of Defendants

D. Kimbrough

Burroughs

R. Ramos

M. Pettiford

L.S. Thomas

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I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Elyah Thompson	
All other names by which	·	
you have been known:		
ID Number	75287	
Current Institution	Chester County from	,
Address	501 S. Wownset Rood	The state of the s
	west chester PA	19382
	City State	Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1	
Name	Kimbrough, O.
Job or Title (if known)	Correctional Officer
Shield Number	113
Employer	Mester County Prison
Address	501 S. Wawaset Road
	West Chester Pa 19382 City State Zip Code
	Individual capacity Official capacity
Defendant No. 2	
Name	Burroughs
Job or Title (if known)	Correctional Officer i
Shield Number	
Employer	Chester County Ruson
Address	501 S. Wankiset Road
	West Chester Pa 19382 City State Zip Code
	Individual capacity Official capacity

	Defendant No. 3	
	Name	B. Ramos
	Job or Title (if known)	Sergeant Correctional other
	Shield Number	762
	Employer	chester County Prison
	Address	SOIS, WOWGSET ROOD
		West Christer G 19387 City State Zip Code
		Individual capacity Official capacity
	Defendant No. 4	
	Name	See Attachment No. 2
	Job or Title (if known)	
•	Shield Number	For turther Detendant
	Employer	
	Address	Intormation
		City State Zip Code
	•	Individual capacity Official capacity
Under immu Feder	nities secured by the Constitution a	ate or local officials for the "deprivation of any rights, privileges, or and [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of 88 (1971)</i> , you may sue federal officials for the violation of certain
Α.	Are you bringing suit against (che	eck all that apply):
	Federal officials (a Bivens c	laim)
	State or local officials (a § 1	1983 claim)
B.	the Constitution and [federal law	ring the "deprivation of any rights, privileges, or immunities secured by rs]." 42 U.S.C. § 1983. If you are suing under section 1983, what y right(s) do you claim is/are being violated by state or local officials?
	Excessive force (Intil)	defaurre)- Que Process Clause - Foxurteenth Amendmen
C.	Plaintiffs suing under Bivens ma are suing under Bivens, what con officials?	sy only recover for the violation of certain constitutional rights. If you astitutional right(s) do you claim is/are being violated by federal

Case 2:22-cv-04053-JP Document 2 Filed 10/06/22 Page 5 of 18 ATTACHMENT NO.: _____

Defendant No.: 4	
Name: M. Pettiford	•
Job or Title: Lieutenant Correctional Office	<u>. </u>
Shield Number:	
Employer: Chester County Prison	
Address: 501 S. Wawaset Rand	
West Chester Pa City State	19382 ZIP Code
Individual Capacity	Official Capacity
Defendant No.: 5	•
Name: L.S. Thomas	
Job or Title: Lieutement Correctional OHi	<u>rer</u>
Shield Number: 126	
Employer: Chester County Prisin	<u>.</u>
Address: 501 S. Wawaset Road	
West Chester An State	79382 ZIP Code
🔀 Individual Capacity	Official Capacity
Defendant No.:	•
Name:	
Job or Title:	
Shield Number:	
Employer:	
Address:	,
Chata	ZIP Code
City State	
Individual Capacity	Official Capacity
Defendant No.:	
Name:	
Job or Title:	
Shield Number:	
Employer:	
Address:	.
City State	ZIP Code
· ,	Official Capacity
Individual Capacity	and Ottrerar oabacre

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	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
		0 · · · · · · · · · · · · · · · · · · ·
		See Atlahment No. 3
Π.	Priso	ner Status
	Indica	ate whether you are a prisoner or other confined person as follows (check all that apply):
		Pretrial detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
	·	Other (explain)
v.	Stater	nent of Claim
	allege furthe	as briefly as possible the facts of your case. Describe how each defendant was personally involved in the d wrongful action, along with the dates and locations of all relevant events. You may wish to include r details such as the names of other persons involved in the events giving rise to your claims. Do not cite ases or statutes. If more than one claim is asserted, number each claim and write a short and plain nent of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose
	B.	If the events giving rise to your claim arose in an institution, describe where and when they arose.
	٠.	
		Cellblack R sallypart; November 18th, 2021 @ 1855 hours

II.D. Statement of Jurisdiction

Defendant Correctional Officers D. Kimbrough and Burroughs violated Plaintiff's Fourteenth Amendment, specifically the Due Process Clause, in subjecting him while being a pre-trial detained to cruel and unusual punishment in blatantly physically assaulting him with closed fists and feet and falsifying a misconduct citation in an attempt to justify the assault, while employed by and on duty at Chester County Prison, a state/local government entity, and thus acting under color of state and for local law.

Defendant Correctional Officers R. Ramos, M. Pethford and L.S. Thomas anotated Plaint it's Fourteenth Amendment, specifically the Due Process Clause, where they were fully aware that defendants Kimbrough and Burroughs had assimilted Plaintiff, and furthered the correctiony thereof by citing Plaintiff with a misconduct citation in attempt to Justify and cover up the assault (R. Ramos); refusing to conduct any kind of investigation into the citation and instead, assisting in covering up the assault, and failing to meet due process requirements, (m. Pethford); and refusing to investigate an appeal and assisting in covering up the assault, (L.S. Thomas); while employed by and on duty at Chester County Prison, a state/local government entity, thus acting under color of state and for local law.

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C. What date and approximate time did the events giving rise to your claim(s) occur?

November 18th 2021 @ 1855 hours

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

See Allochments No. 485

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Bruising, swelling and lacerations to eye, hard, nose & morth; bruised you; sovere concursion; medically observed overnight the treatment offered

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

injunctive relief - comercis be installed in sally posts; enforce due process rights for disciplinary hearings l'opprents.

*550,000.00 in punitive damages to punish alther's assaultine behavior and invention of further assaults.

*50,000.00 in compensatory damages for pain and suffering, past and future medical expenses and legal expenses

Totalling *600,000.00 in monetary relief.

IV. D. Statement of claim

On November 18th, 2021 of approximately 1845 hours, Plaintiff pressed the emergency call button inside cell 63 on cell block R3, where he was housed, to alert the officers in the control room "bulbble" that he was experiencing snarp, intense pains in his chest. Defendant Correctional Officer D. Kimbrough ("Kimbrough") approached the computers controlling cellblock B3 and sitenced the alarm notifying him that Plaintill had pressed the button, ignoring it. Plaintiff pressed the button again to which Kimbrough responded in the same manner. Planitiff pressed the button or third time. This time, defendant correctional officer Burroughs ("Burroughs") responded, asking Plaintiff what he needed. Plaintiff informed him that he was experiencing sharp, intense pains in his chest, Burroughs that he would call medical and arrange an escort. Plaintiff at this time was classified as a security level TC meaning that he must be put in handcults and accompanied by an escort when leaving his cell. Disregarding that, Kimbrough opened the door to Plaintiff's cell via the computer in the control room, telling him to "come down to the sally port and wait for [the] escort." Kimbraigh intentionally violated facility policy for the sole purpose of attempting to justify the assault on Plaintiff that he was planning. While Plaintiff was waiting in the sally port for the escort, Kimbrough began taunting i harassing and threatening him, He told kimbrough that he just wanted to get medical ottention for his chest pains. Kimbrough made a reference to a grievance that Plaintiff had submitted earlier that same day, calling him a "bitch ass rat" and saying that he "should fuck (nim] up right now." After a brief moment, Kimbrough began striking Plaintiff's face and head with closed fists, Plaintiff pressed both mands opened on the window for cellblock R2 so that the comeras could clearly see that he was not acting in any aggressive, assaultive, combative or resistive manner. Kimbrough continued to punch him and Burroughs told him to "get the fuck on the floor." Plaintil complied, laying facedown on the floor and allowing Burroughs to place him in handculls, but kimbrough's assault and not stop. When

Kimbrough finally stopped punching Plaintiff, who was face-down on the floor and in handculfs, he kicked him in the face, then used his radio to call an emergency code one, which coordinates an immediate response to address an inmate assault an stall. Afterwards, Kimbrough tabricated a misconduct citation occurring him of threatening and attempting to assault an officer to justify Plaintiff's evident injuries. Defendant Correctional Officer R. Ramos ("Ramos") was the supervisor for Cellblock R, and accordingly reviewed videos of the incident as cameras on celliblock R2 captured it. Observing the incident as it had truly occurred, and knowing that Kimbrough had not only entirely talsified the citation, but committed a merciless, unprovoked association Plainty, still elected to approve the citation. At a disciplinary hearing for the citation, Plaintiff explained to detendant currectional officer M. Pettiford ("Pettiford") what had happened and that the cameras would support his version of the incident and contradict the citation. Pethford refused to review comera tootage and denied due process in refusing to be impartial and conduct any surt of evidentiary review stating that he clidn't come and would sumply take the office's word for it." Pethford sanctioned Plantiff with an excess of 100 day disciplinary time housed in a restricted housing unit ("RHU"). Plaintif Submitted on appeal to defendant Correctional Officer L.S. Thomas ("Thomas") again explaining what actually occurred and indicating that a simple review of the Conheras would prove what happened. However, Thomas also refused to review them, denying due process, storing that "the incident citation is sufficient." Thomas, Pettiford and Romos intentionally conspired in covering up the assault that Plaintiff was subjected to.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

Α.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	Chester County Prison
В.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	□ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes ·
	□ No
	Do not know
	If yes, which claim(s)?

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D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
	Yes
	□ No
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes
	□ No
E	If you did file a grievance:
	1. Where did you file the grievance?
	Chester County Prison
	2. What did you claim in your grievance?
	The claim as specified herein.
	3. What was the result, if any?
	Denied; see Exhibit "P-1" attached hereto
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
	Request for appeal denied by failure to respond; govers complete by failure

Chester County Prison Inmate Grievance Disposition

To: Warden Ronald Phillips		
From: Captain Sergi		24
Inmate Name: Elijah Thompson#75287 Complaint Number: 75287-113021 Date of Incident: 11/18/21 Date Complaint Received: 12/6/21 Date Complaint Reviewed: 12/6/21		4₫
XX I have reviewed this complaint and I grievance procedure for the following reasons:		t it is not subject to the inmate
Inmate Thompson claims he was assaulted by	Officer Kimbrough	who was escorting him from R-
block sally port to Medical for chest pains. Aft	er reviewing Lt. Bo	yds findings, Officer reports an
reviewing camera footage available through th	e Quad #2 Control v	vindows, Thompson is seen
taking a threatening posture and aggressively a	pproaching the Offi	cer. Thompson then stepped
toward Officer Kimbrough, into his personal sp	pace, threatening to	"Fuck him up". After pushing
Thompson back several times, Officer Kimbou	igh now felt threater	ned and when Thompson
advanced again and threw his pass at Kimbrou	gh he was taken to t	he floor. A struggle ensued and
Officer Burroughs had to assist Kimbrough in	getting Thompson c	uffed. A Code # 1 was called.
Nothing in the reports or the video can give me	erit to Inmate Thom	pson being inappropriately
handled; his aggressive actions toward staff ca	used the officers to l	have to physically restrain him
using what force was necessary. Complaint Officers Signature		12/7/21 Date
XX This complaint has been	formally resolved as	s follows:
Nothing to show inappropriate force used b	y staff while restra	ining Inmate Thompson.
XX This grievance has been heard	I and I have been inf	formed in writing of the
grievance officer's decision. I have received a	copy of the decision	. I am aware that this decision
maybe appealed in writing to the Warden with	in the next 5 workin $\frac{12}{12}$	g days.
Inmates Signature	Date'	Complaint Officers Signature
•		•
Approved:	7	
Disapproved:	<u>~</u>	12-6-21
Warden Ronald Phillips		Date

	F.	If you did not file a grievance:
	Γ.	
		1. If there are any reasons why you did not file a grievance, state them here:
		2. If you did not file a grievance but you did inform officials of your claim, state who you informed,
		when and how, and their response, if any:
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
		Tomodies.
		(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)
m.	Previo	us Lawsuits
	The "the filith brought malicide"	nree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying ng fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, at an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, ous, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of serious physical injury." 28 U.S.C. § 1915(g).
	To the	best of your knowledge, have you had a case dismissed based on this "three strikes rule"?
	Y	es
	M	0
	If yes,	state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

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Α.		e you filed other lawsuits in state or federal court dealing with the same facts involved in this
		Yes
	区	No
В.	If-yo mor	our answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1.	Parties to the previous lawsuit
	•	Plaintiff(s)
	•	Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		Yes
		No
		If no, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
C	C. Ha	ave you filed other lawsuits in state or federal court otherwise relating to the conditions of your opposite on the condition of your opposite on the condition of your opposite or federal court otherwise relating to the conditions of your opposite or federal court otherwise relating to the conditions of your opposite or federal court otherwise relating to the conditions of your opposite or federal court otherwise relating to the conditions of your opposite or federal court otherwise relating to the conditions of your opposite or federal court otherwise relating to the conditions of your opposite or federal court otherwise relating to the conditions of your opposite or federal court otherwise relating to the conditions of your opposite or federal court of the condition of your opposite or federal court of the condition of your opposite or federal court of the condition of your opposite or federal court of the condition of your opposite or federal court of the condition of your opposite or federal court of the court of the condition of the condition of the court of the

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	Yes Yes
	□ No
D.	If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1. Parties to the previous lawsuit
	Plaintiff(s) Elyan Thompsn
	Defendant(s) Holly, Miller, Cross, Reese and Baker
	2. Court (if federal court, name the district; if state court, name the county and State)
·	U.S. District - Eastern District of Pennsy lucinic
	3. Docket or index number
	22-cv-3507-5P
	4. Name of Judge assigned to your case
•	John B Padara
	5. Approximate date of filing lawsuit
	August 10, 2022
	6. Is the case still pending?
	Yes
	No
	If no, give the approximate date of disposition
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:			
Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Elyah Thompson 15287 501 S. Wawaset Load West Chester City		15382 Zip Code
For Attorneys			
Date of signing:	· · · · · · · · · · · · · · · · · · ·		
Signature of Attorney			
Printed Name of Attorney			
Bar Number Name of Law Firm			
Address			
	City	State	Zip Code
Telephone Number			
E-mail Address	·		



EASTERN DISTRICT OF PENNSYLVANIA

OFFICE OFF THE CIERK
UNITED STATES DISTRICT COURT
PHILADEIPHIA, PA 19106-9865





